## STATEMENT OF ECONOMIC INTERESTS

**COVER PAGE** 

Date Received
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Please type or print in ink.  NAME OF FILER (LAST)	(FIRST)	// // // // // // // // // // // // //
Muray	KATHRYN	LEE
1. Office, Agency, or Court	12111111111	
Agency Name	W 0 -	
Division, Board, Department, District, if applicable	Mayor Pro	lem
Division, Board, Department, District, if applicable	Your Position	
► If filing for multiple positions, list below or on an attachment.		, A
Agency: RCT	Position: Board	Member
2. Jurisdiction of Office (Check at least one box)	· · · · · · · · · · · · · · · · · · ·	
☐ State	Judge (Statewide Jurisc	diction)
Multi-County	County of	
X City of CRESCENT CITY	Other	
3. Type of Statement (Check at least one box)		<del></del>
Annual: The period covered is January 1, 2046, through December 31, 2010. 2011 -or-	Leaving Office: Date (Check one)	Left
The period covered is	<ul> <li>The period covered leaving office.</li> </ul>	is January 1, 2010, through the date of
Assuming Office: Date	<ul> <li>The period covered of leaving office.</li> </ul>	is, through the date
Candidate: Election Year Office sought, if different	ent than Part 1:	
4. Schedule Summary		<del></del>
Check applicable schedules or "None." ▶ Tot	otal number of pages including this cover page:	
Schedule A-1 - Investments – schedule attached	Schedule C - Income, Loans, & Business Positions - schedule attached	
☐ Schedule A-2 - Investments – schedule attached	Schedule D - Income - Gifts - schedule attached	
Schedule B - Real Property - schedule attached	Schedule E - Income - Gifts	- Travel Payments - schedule attached
-or- ☐ None - No reportable interests	on any schedule	
		-
		-
I certify under penalty of perjury under the laws of the State of California		
$-\mathcal{W}$		
Date Signed // asch 1, 20/1 Sign		

## SCHEDULE C Income, Loans, & Business **Positions**(Other than Gifts and Travel Payments)

CALIFORNIA FORM 7	00
FAIR POLITICAL PRACTICES COMMIS	NOIS
Name	

▶ 1. INCOME RECEIVED	► 1. INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Alliance CDFI	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
431 H Street Crescent Ctc Classe	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-Profit	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
Executive Director	
GROSS INCOME RECEIVED	GROSS INCOME RECEIVED
\$500 - \$1,000	\$500 - \$1,000
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
	CONSIDER THE FOR MALEY WIGOUE WAS PERFECT.
CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Salary Spouse's or registered domestic partner's income	CONSIDERATION FOR WHICH INCOME WAS RECEIVED  Salary Spouse's or registered domestic partner's income
Loan repayment L Partnership	Loan repayment Partnership
Sale of(Property, car, boat, etc.)	Sale of(Property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
Other	Other
Other(Describe)	(Describe)
I	<u></u>
▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PER	OD Harris and the bound to be supplied by the first of the district of the contract of the con
	lending institutions, or any indebtedness created as part
of a retail installment or credit card transaction, made	
	your official status. Personal loans and loans received
not in a lender's regular course of business must be	disclosed as follows.
NAME OF LENDER*	INTEREST RATE TERM (Months/Years)
	%
ADDRESS (Business Address Acceptable)	
	SECURITY FOR LOAN
BUSINESS ACTIVITY, IF ANY, OF LENDER	None Personal residence
	Real Property
HIGHEST BALANCE DURING REPORTING PERIOD	Street address
\$500 - \$1,000	City
\$1,001 - \$10,000	City
☐ \$10,001 - \$100,000	Guarantor
OVER \$100,000	_
	Other(Describe)
Comments:	